

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723110

Entity Name: THE FORE-PLEX ASSOCIATION, INC.

Current Principal Place of Business:

2515 LOWSON BLVD.,
DELRAY BEACH, FL 33445

Current Mailing Address:

C/O FOX ECKLOND BUSINESS SERVICES, INC.
104 NW SPANISH RIVER BLVD.
BOCA RATON, FL 33431 US

FEI Number: 65-0828709

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAJDERA KIM, PLLC % DAVID J. KIM ESQ.
3335 NW BOCA RATON BLVD.
BOCA RATON, FL 33431 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LEIGHTON, STEPHEN
Address 2403 A LOWSON BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title VP
Name SCHULTZ, BOB
Address 2415 C LOWSON BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title S
Name AMICO, JANET
Address 2315 A LOWSON BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title D
Name LOCIGNO, MIKE D
Address 2717 LOWSON BLVD APT # A
City-State-Zip: DELRAY BEACH FL 33445

Title TREASURER
Name TASHMAN, MYRA
Address 2525 D LOWSON BLVD
City-State-Zip: DELRAY BEACH FL 33445

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MYRA TASHMAN

TREASURER

03/24/2017

Electronic Signature of Signing Officer/Director Detail

Date